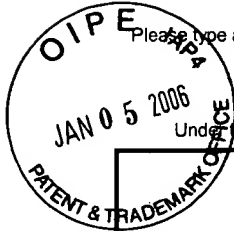


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AP/1647
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PTO/SB/21 (05-03)

Approved for use through 04/30/2003. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number 09/739,933

Filing Date December 18, 2000

First Named Inventor REID, JAMES STEVEN

Group Art Unit 1649

Examiner Name TURNER, SHARON L.

Total Number of Pages in This Submission 32

Attorney Docket Number IRVN-263CIP

ENCLOSURES (check all that apply)

- ☐ Fee Transmittal Form
- ☐ Fee Attached
- ☐ Amendment / Reply
- ☐ After Final
- ☐ Affidavits/declaration(s)
- ☐ Extension of Time Request
- ☐ Express Abandonment Request
- ☐ Information Disclosure Statement
- ☐ Certified Copy of Priority Documents
- ☐ Response to Missing Parts/ Incomplete Application
- ☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

- ☐ Assignment Papers (for an Application)
- ☐ Drawing(s)
- ☐ Licensing-related Papers
- ☐ Petition
- ☐ Petition to Convert to a Provisional Application
- ☐ Power of Attorney, Revocation Change of Correspondence Address
- ☐ Terminal Disclaimer
- ☐ Request for Refund
- ☐ CD, Number of CD(s)

- ☐ After Allowance Communication to Group
- ☐ Appeal Communication to Board of Appeals and Interferences
- ☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
- ☐ Proprietary Information
- ☒ Communication (1 pg.)
- ☒ Other Enclosure(s) (please identify below):
- Copies of Appellants' Reply Brief and Request for Oral Hearing as timely filed on September 12, 2005. & postcard date stamped by the Patent Office (30 pgs.)**
- Postcard**

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Signing Attorney/Agent (Reg. No.)

CAROL L. FRANCIS, 36,513
BOZICEVIC, FIELD & FRANCIS, LLP

Signature

Date

January 5, 2006

EXPRESS MAIL LABEL NO. EV 687 636 505 US

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COMMUNICATION

Address to:
Mail Stop: Appeal Brief - Patent
Commissioner for Patents
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Alexandria, VA 22313-1450

Customer Number	24353
Atty. Docket No.	IRVN-263CIP
Application Number	09/739,933
Confirmation Number	4882
Filing Date	December 18, 2000
First Named Inventor	REID, JAMES STEVEN
Examiner Name	TURNER, SHARON L.
Group Art Unit	1649

Sir:

It has come to Appellants' attention that neither their Reply Brief nor their Request for Oral Hearing has been entered into the PAIR database of the U.S. Patent and Trademark Office. Teleconferences with officials at the Board of Appeals and Patent Interferences and with Examiner Turner has confirmed that these papers were never matched with the file.

We enclose here copies of Appellants' Reply Brief and Request for Oral Hearing as timely filed on September 12, 2005. We also include a copy of the postcard date stamped by the Patent Office, indicating these documents were timely received.

Immediate entry of Appellants' Reply Brief and Request for Oral Hearing is respectfully requested.

While no fees are believed due with this Communication, the Commissioner is hereby authorized to charge any underpayment of fees associated with this communication, including any necessary fees for extensions of time, or credit any overpayment to Deposit Account No. 50-0815, order number IRVN-263CIP.

Respectfully submitted,
BOZICEVIC, FIELD & FRANCIS LLP

Date: Jan 5, 2006

By: Carol L. Francis

Carol L. Francis
Registration No. 36,513

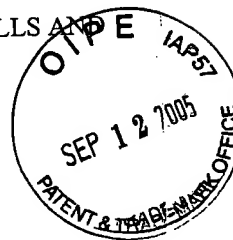
BOZICEVIC, FIELD & FRANCIS LLP
1900 University Avenue, Suite 200
East Palo Alto, California 94303
Telephone: (650) 327-3400; Facsimile: (650) 327-3231

Atty/Sec: CLF/mpc
Atty Docket No. IRVN-263CIP Date Mailed: September 12, 2005
Application No.: 09/739,933 Filing Date: December 18, 2000
Inventor(s): REID, JAMES STEVEN

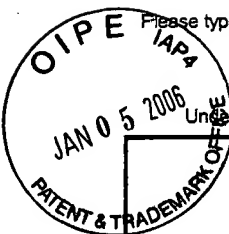
Title: "COMPOSITIONS AND METHODS FOR
MANIPULATING GLIAL PROGENITOR CELLS AND
TREATING NEUROLOGICAL DEFICITS"

Enclosure(s):

- ❖ Transmittal (1 pg.)
 - ❖ Fee Transmittal (1 pg.)
 - ❖ Credit Card Payment Form (1 pg.)
 - ❖ Request for Oral Hearing (2 pgs.)
 - ❖ Appellants' Reply Brief Under 37 C.F.R. §41.41 (25 pgs.)
- EXPRESS MAIL LABEL NO. EV 687 633 362 US



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By imprinting PTO Date Stamp and
Returning to addressee



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PTO/SB/21 (05-03)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/739,933
Filing Date	December 18, 2000
First Named Inventor	REID, JAMES STEVEN
Group Art Unit	1649
Examiner Name	TURNER, SHARON L.
Attorney Docket Number	IRVN-263CIP

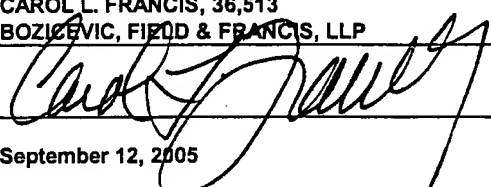
Total Number of Pages in This Submission

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form Credit Card Payment Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input checked="" type="checkbox"/> Request for Oral Hearing <input checked="" type="checkbox"/> Appellants' Reply Brief Under 37 C.F.R. §41.41 <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard
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Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

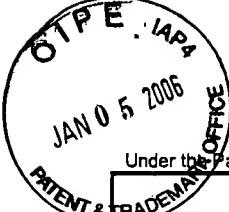
Signing Attorney/Agent (Reg. No.)	CAROL L. FRANCIS, 36,513 BOZICEVIC, FIELD & FRANCIS, LLP
Signature	
Date	September 12, 2005

DOCKETED

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PTO/SB/17 (12-04)

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FEE TRANSMITTAL For FY 2005		Complete if Known	
		Application Number	09/739,933
		Filing Date	December 18, 2000
		First Named Inventor	REID, JAMES STEVEN
		Examiner Name	TURNER, SHARON L.
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27	Art Unit	1649	
TOTAL AMOUNT OF PAYMENT	(\$) 500.00	Attorney Docket No.	IRVN-263CIP

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: **50-0815** Deposit Account Name: **Bozicevic, Field and Francis LLP**
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims - 20 or HP = _____ x _____ = _____ **Fee Paid (\$)**

HP = highest number of total claims paid for, if greater than 20

Indep. Claims - 3 or HP = _____ x _____ = _____ **Fee Paid (\$)**

HP = highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = _____ / 50 = _____ (round up to a whole number) x _____ = _____ **Fee Paid (\$)**

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) _____

Other: **Fee for Request for Oral Hearing** **\$500.00**

SUBMITTED BY		
Signature		Registration No. (Attorney/Agent) 36,513
Name (Print/Type)	Carol L. Francis	Telephone (650) 327-3400
		Date 09/12/2005

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